	STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT								
	State/Territory: UTAH								
	Optional Sliding Scale Premiums Imposed on Qualified Disabled and Working Individuals								
Α.	The following method is used to determine the monthly premium imposed on qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act:								
	N/A								
в.	A description of the billing method used is as follows (include due date for premium payment, notification of the consequences of nonpayment, and notice of procedures for requesting waiver of premium payment):								
	N/A								
*Des	scription provided on attachment.								
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		STATE PLA	N UNDER T			SOCIAL SECURITY	Y ACT
		State/Terri	tory:	U	JTAH		
c.	State	or local fur	nds under	other p	rograms	are used to pay	for premiums:
		Yes			No		
D.	The cr	iteria used	for deter	rmining	whether	the agency will	waive payment of
	descri	bed below:	it would	cause a	n unaue	hardship on an	Individual are
				N/A			
*Des	scripti	on provided	on attach	nment.			
TN I	No Q ersedes No N	Approv	val Date _	12/18	Jar	Effective Date	10/1/91

HCFA ID: 7986E